amount effective in treating, in a human, a staphylococcal infection that is not resistant to the glycopeptide antibiotic.

49. The method of Claim 29, wherein the amount of anti-staphylococcal agent administered is an amount effective in treating, in a human, a staphylococcal infection that is not lysostaphin-resistant and wherein the amount of the β-lactam antibiotic administered is an amount effective in treating, in a human, a staphylococcal infection that is not resistant to the β-lactam antibiotic. --

REMARKS

Claims 18-22 were rejected under 35 U.S.C. §112, second paragraph. This rejection was based on certain alleged ambiguities in Claim 18. Claim 18, however, has been canceled. Accordingly, reconsideration and withdrawal of this rejection is respectfully requested.

Claims 18-22 were rejected under 35 U.S.C. 102(b) as allegedly being anticipated by Polak et al. This rejection appears on pages 4-5, numbered paragraph 3 of the Official Action. Claims 18-22 were also rejected under 35 U.S.C. §103(a) as allegedly being obvious over Schaffner [Yale J. Biol. Med. (1967), 39(4), pp. 215-229] taken together with Moreira or DeHart. This rejection appears on pages 5-6, numbered paragraph 4 of the Official Action. Claims 18-22 have been canceled. It is respectfully submitted that the cancellation of these claims has obviated each of the aforementioned rejections. Accordingly, reconsideration and withdrawal of these rejections is respectfully requested.

Additionally, it is respectfully submitted that the references cited in the Official Action, taken alone or in combination, fail to teach or reasonably suggest the method as set forth in

independent Claims 29 and 35. In particular, none of the cited references taken alone or in combination teach or reasonably suggest a method as set forth in Claim 29 comprising simultaneously administering an anti-staphylococcal agent other than a cell-wall active antibiotic in an amount of from 15-150 mg/kg body weight/day and a β-lactam antibiotic in an amount of from 50-250 mg/kg body weight/day to a human subject. Further, none of the cited references taken alone or in combination teach or reasonably suggest a method as set forth in Claim 35 comprising simultaneously administering an anti-staphylococcal agent other than a cell-wall active antibiotic in an amount of from 15-150 mg/kg body weight/day and a glycopeptide antibiotic in an amount of from 10-75 mg/kg body weight/day to a human subject. Therefore, in view of the above, it is respectfully submitted that the pending claims are patentable over the references cited in the Official Action.

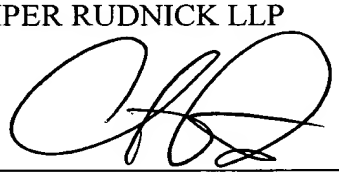
The remaining claims depend from either of Claims 29 or 35 and are therefore also patentable over the references cited in the Official Action for at least the reasons set forth above with respect to Claims 29 and 35.

CONCLUSION

All rejections having been addressed by the present amendments and response, Applicants believe that the present case is in condition for allowance and respectfully request early notice to that effect. If any issues remain to be addressed in this matter which might be resolved by discussion, the Examiner is respectfully requested to call Applicants' undersigned counsel at the number indicated below.

Respectfully submitted,

PIPER RUDNICK LLP



Steven B. Kelber
Registration No. 30,073
Attorney of Record

Christopher W. Raimund
Registration No. 47,258

1200 Nineteenth Street, N.W.
Washington, D.C. 20036-2412
Telephone No. (202) 861-3900
Facsimile No. (202) 223-2085

MARKED-UP COPY OF AMENDED CLAIMS

3. (Twice Amended) The method of Claim 29 [23], wherein [said] administration is achieved through any one or more of intravenous (IV), intramuscular (IM), subcutaneous (SC), intraperitoneal (IP), intrathecal or topical administration.

4. (Amended) The method of Claim 29 [3], wherein [said] administration is subcutaneous [SC], intraperitoneal [IP], intrathecal or topical.

5. (Amended) The method of Claim 29 [3], wherein [said] administration is either intravenous [IV] or intramuscular [IM].

8. (Amended) The method of Claim 29 [7], wherein the [said] β-lactam is selected from the group consisting of a penicillin, a cephalosporin and a carbapenem.

9. (Amended) The method of Claim 29 [8], wherein the [said] β-lactam is a penicillin.

10. (Amended) The method of Claim 29 [23], wherein the [said] staphylococcal infection is mediated by at least one *S. aureus* microorganism.

11. (Amended) The method of Claim 29 [23], wherein the [said] staphylococcal infection is mediated by at least one coagulase-negative staphylococcal microorganism.

25. (Amended) The method of Claim 29 [24], wherein the anti-staphylococcal agent is one whose activity is mediated by cleavage of the cell wall of staphylococci.

26. (Amended) The method of Claim 29 [24], wherein the anti-staphylococcal agent is selected from the group consisting of lysostaphin, *lasA* protease and achromopeptidase.

27. (Amended) The method of Claim 29 [23], wherein the [said] staphylococcal infection comprises a coagulase-negative staphylococcal microorganism, a coagulase-positive staphylococcal microorganism or combinations thereof.

28. (Amended) The method of Claim 35 [24], wherein the [said] staphylococcal infection comprises a coagulase-negative staphylococcal microorganism, a coagulase-positive staphylococcal microorganism or combinations thereof.